Filed this 22nd day of November 19 99

RECEIVED

OCT 25 1999

Secretary of State

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Joyce Hazeltine

SECRETARY OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: Belle Fourche Bee		2. DATE OF FILING: 10-20-99
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE: 41.60
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION *(Street, City, County, State and ZIP+4 Code) (Not printers)*: P.O. Box 400, Belle Fourche, SD 57717		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER *(Not printer)*: P.O. Box 400, Belle Fourche, SD 57717		
6. FULL NAME OF PUBLISHER: Tim Velder		
7. OWNER *(If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.* FULL NAME: Dickson Media	COMPLETE MAILING ADDRESS: 2568 Ivy RD, Ste D, Charlottesville, VA 22903	
8. KNOWN BONDHOLDERS, MORTGAGEES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS. MORTGAGES OR OTHER SECURITIES *(If there are none, so state. If more space is needed, list on back of this form)*		

9. EXTENT AND NATURE OF CIRCULATION *(See instructions on reverse side)*	AVERAGE NO. COPIES EACH ISSUE D PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUE NEAREST TO FILING DATE
A. TOTAL NO. COPIES *(Net Press Run)*	2150	2150
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales	1244	1378
2. Mail Subscription *(Paid and or requested)*	723	667
C. TOTAL PAID AND/OR REQUESTED CIRCULATION *(Sum of 10B1 and 10B2)*	1967	2045
D. FREE DISTRIBUTION BY MAIL, CARRIER OR OTHER MEANS	45	43
SAMPLES, COMPLIMENTARY, AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION *(Sum of C and D)*	2012	2088
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	138	62
2. Return from News Agents		
G. TOTAL *(Sum of E, F1 and 2 -- should equal net press run shown in A)*	2150	2150

I swear that the statements made by me above are correct and complete.

SIGNATURE AND TITLE OF PUBLISHER, BUSINESS MANAGER OR OWNER: Tim Velder

State of South Dakota)

s

County of Butte)

(Seal)

Sworn to before me this 22nd day of October, 19 99

Helen Stearns

Notary Public

My commission expires 9/27/01

Form: SOS REC 051 01/93

RECEIVED

OCT 25 1999

Secretary of State

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Belle Fourche Bee		2. DATE OF FILING 10-20-99
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE 41.60
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION *(Street, City, County, State and ZIP+4 Code) (Not printers)* P.O. Box 400, Belle Fourche, SD 57717		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER *(Not printer)* P.O. Box 400, Belle Fourche, SD 57717		
6. FULL NAME OF PUBLISHER: Tim Velder		
7. OWNER *(If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.* FULL NAME: Dickson Media COMPLETE MAILING ADDRESS: 2568 Ivy RD, Ste D, Charlottesville, VA 22903		
8. KNOWN BONDHOLDERS, MORTGAGEES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES *(If there are none, so state. If more space is needed, list on back of this form)*		

9. EXTENT AND NATURE OF CIRCULATION *(See instructions on reverse side)*	AVERAGE NO. COPIES EACH ISSUE D PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUE NEAREST TO FILING DATE
A. TOTAL NO. COPIES *(Net Press Run)*	2150	2150
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales	1244	1378
2. Mail Subscription *(Paid and or requested)*	723	667
C. TOTAL PAID AND/OR REQUESTED CIRCULATION *(Sum of 10B1 and 10B2)*	1967	2045
D. FREE DISTRIBUTION BY MAIL, CARRIER OR OTHER MEANS	45	43
SAMPLES, COMPLIMENTARY, AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION *(Sum of C and D)*	2012	2088
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	138	62
2. Return from News Agents		
G. TOTAL *(Sum of E, F1 and 2 -- should equal net press run shown in A)*	2150	2150

I swear that the statements made by me above are correct and complete.

SIGNATURE AND TITLE OF PUBLISHER, BUSINESS MANAGER OR OWNER

Tim Velder

State of South Dakota)
: ss
County of Butte)

(Seal)

Sworn to before me this 22nd day of October, 1999

Helen Stewart
Notary Public

My commission expires 9/22/01

Form: SOS REC 051 01/93